APPLICATION FORM FOR CHANGE IN BANK ACCOUNT DETAILS

ARN 161457 **EUIN - E 299794**

Please fill in the information below legibly in English and in CAPITALS.

To

DATE DD MM YYYY

I/We wish to change the bank details in my / our folio as mentioned below.

A. UNIT HOLDER INFORMATION

Folio No. /

Sole / First Unit Holder

Scheme/ Plan/ Option

B. NEW BANK DETAILS

Account No. (As appearing in your latest cheque book/ pass book/ bank account statement)

Account Type (Please tick ✔) ☐ Savings ☐ Current ☐ NRE ☐ NRO ☐ FCNR ☐ others (Please specify)

Name of the Bank

Branch Bank City

MICR Code (9 digit number appearing next to the Cheque No.) IFSC Code

(11 Character code appearing on your cheque leaf. If you do not find this on your cheque leaf, please check for the same with same with your Bank)

C. DOCUMENTS SUBMITTED HEREWITH

☐ For bank account currently registered with (any one of the following):
- ☐ A cancelled original cheque leaf
- ☐ Photocopy of bank passbook (OSV done by AMC/ CAMS official)

☐ For new bank account (any one of the following):
- ☐ A cancelled original cheque leaf
- ☐ Photocopy of bank passbook (OSV done by AMC/ CAMS official)

** New Bank & Old Bank cancelled cheque leafs to be submitted in Original. If Photocopy of New & Old Bank cancelled cheque leafs are submitted, OSV to be done only by AMC or CAMS. Investor Name should be pre-printed on Cheque Leaf. If the same is not pre-printed then Bank Account Statement also needs to be submitted with Cancelled Cheque Leaf. All supporting documents should clearly evidence the Bank Name, Account Number , Account Type and Names of all Account holders.*

D. CHANGE IN TAX STATUS

Incase of Change in Tax Status, please tick the applicable new tax status.

☐ Resident Individual ☐ NRI on Repatriation Basis ☐ NRI on Non-Repatriation Basis

E. NEW CONTACT DETAILS

TEL: OFFICE **TEL: RES.**

FAX **MOBILE**

EMAIL

Please send my ☐ Account Statement ☐ Newsletters ☐ Annual Report ☐ Other Statutory Information by email of physical documents.

F. UNIT HOLDER(S) SIGNATURE(S)

I/ We hereby declare that particulars given above are correct and express my willingness to receive credit of Dividend / Redemption proceeds through the mode indicated above. If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information. I/ We would not hold Kotak Mutual Fund/ Kotak Asset Management Company Limited, its registrars and other service providers responsible. I/ We will also inform Kotak Mutual Fund/ Kotak Asset Management Company Limited, any changes in my/ our above bank account.

SIGNATURE(S) (To be signed by ALL UNIT HOLDERS if mode of holding is Joint)

First Unit Holder Second Unit Holder Third Unit Holder

Wealth SEVA

ACKNOWLEDGEMENT SLIP

(To be filled by Applicant)

DATE DD MM YYYY

Investors Name

Folio Number

Please retain this Acknowledgement Silp for future reference

Official Acceptance Point Stamp & Sign